

STATE OF NEW HAMPSHIRE 2017 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

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JAN 24 2018

NEW HAMPSHIRE DEPARTMENT OF STATE

PLEASE PRINT

I. Name of Lobbyist(s	Paul A. Worsowicz; Ari B. Pol	Paul A. Worsowicz; Ari B. Pollack; Heidi L. Kroll; Robert J. Dietel		
II. Name of Lobbyist's	partnership, firm or corporation, if any:	:		
	GALLAGHER, CALLAHA	N & GARTRELL, P.C.		
	214 North Main Street, C			
603-228-1	1181 603-226-34			
(Telepho	(Fax)	(Email)		
III. This statement cov reportable expense tra	vers: (Choose one – file separate reports in neactions which are not attributable to an	for each client, OR you may file a separate report for ny one client.)		
X All reportable tra		he reporting date relative to the following client.		
	HOME BUILDERS & REMODEL	LERS ASSOCIATION OF NH		
	(Full Name of Client as it appears on the	Lobbyist Registration Form)		
	ansactions by the lobbyist (including the lob particular client.	bbyist's family), or the lobbying firm listed below which are		
IV. Date of Report:	April 26, 2017 🛚	July 26, 2017 □		
	tivity from date of registration to 3/31/17	activity from 4/1/17 to 6/30/17		
	October 25, 2017	January 24, 2018 🗵		
	activity from 7/1/17 to 9/30/17	activity from 10/1/17 to 12/31/17		
V. There have been no If this box is checked, of Concord, NH 03301.	o fees received and no reportable transact omplete just this form and submit it to the S	tions made since the last report. Secretary of State's Office, State House, Room 204,		
VI. Check if addition	al reports are attached:			
X If you have rece	eived fees or made expenditures, you must f	file Addendum A – Fees and Expenses		
If you have paid	1 an honorarium or reimbursed expenses, vo	ou must file Addendum B – Report of Honorariums or		
Evnanca Paimh	urcement			
If you, your fire	n, or your family has made political contrib	outions, you must file Addendum C - Political Contribution		
Sworn Statement/Affi	rmation by Lobbyist	affirm that the foregoing information is true and complete		
to the best of my know	SA 15-B and RSA 664 and hereby swear or	arring that the foregoing another than		
to the best of my know	reage and benefit			
010	orsowy	1-22-18		
17 am 12 h	1 oproving	(Date)		
(Signature of Lobbyi	ST)	(=/		
Paul A. Worsowicz				
(Print Name of lobby	ist)			



STATE OF NEW HAMPSHIRE Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

I. Name of Lobbyist(s)	Paul A. Worsowicz; Ari B. Pollack; Heidi L. Kı	roll; Rob	ert J. Dietel	
II. Name of lobbyist's p	partnership, firm or corporation, if any:			
	GALLAGHER, CALLAHAN & GARTRE			
	(Name of partnership, firm or corporation	on)		
III. Name of Client	HOME BUILDERS & REMODELERS ASSOCIATION OF NH	Date -	January 2	4, 2018
Johnying including fees	nt of all fees received from the client identified above to for services such as public advocacy, government relatoring legislation, and related legal work. The gross for	tions, or	public relation	ns services,
a) Total of all fees recei	ved in this reporting period		a) \$	12,501.00
b) Total of all fees recei (This should equal th	ved this calendar year, prior to this reporting period. ne total prior monthly reports for this calendar year.)		b) \$ 	37,801.77
c) Total of all fees recei (Add lines a and b)	ved to date.		c) \$	50,302.77
d) Indicate the amount of yet been paid.	of any such fees that are due, but have not		d) \$ 	4,167.00
fees. Separate reports a lobbyist(s)/firm that are are to be reported in or reporting period for sa expenses where the exp the cost was \$25.00 or purchase of a ceremonistatement of each indivicovered by (a) (for exargiven to the subject of legislative reception).	artnerships, firms, or corporations are required to reare to be filed for expenditures made relative to each of unrelated to any one client a separate report may be ne of three categories of expenses: (a) the aggregation of three categories of expenses: (a) the aggregation of three categories of expenses: (a) the aggregation of three categories of expenses: (benediture was of \$25.00 or less (for example: meals pless, purchase of a pen with a value of less than \$10 to all object given to a person being lobbied with a value idual expenditure made during this reporting period of mple: purchase of a meal with value of greater than \$25 to but not gree expenses for honorariums, expense reimbursement, of and should not be reported on Addendum A.	filed for the total of b) the a purchased hat is give of \$25.0 greater: 25, purch ater than	the lobbyist(of all expensing a busyon to the per 100 or less); a sthan \$25.00 f ase of a cereing \$50, restaur	es are made by the sylfirm. Expenses es paid during the lof all individuationess lunch where son being lobbied and (c) an itemized or any purpose no monial object to be ant expenses for
support staff, and office	enses for this reporting period for salaries, benefits, expenses, related directly or indirectly to lobbying. xpenditures during this reporting period, not reported	a) b)		12,501,00
in a), of \$25 or less.		c)	\$.00.
c) Total of all itemized	expenditures reported in detail in section VI.			.00

Lobbyist Fees & Expenses, Addendum A – Page 2 Client: HOME BUILDERS & REMODELERS ASSOCIATION OF NH		
d) Total expenses for this reporting period.	.t> Φ	12 501 00
(Add lines a, b and c.)	d) \$	12,501.00
e) Total of expenses paid this calendar year, prior to this reporting period. (This should be the amount on line f of addendum A for last month's report.)	e) \$	37,719.77
f) Total of all expenses year to date.	f) \$	50,220.77
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from lobbying fees period, including by whom paid or to whom charged.	during this	reporting
Paid to:	•	ount
	_	
	_	
	— \$ —	
	_ \$	
Sworn Statement/Affirmation by Lobbyist		
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm that the formula is true and complete to the best of my knowledge and belief.	oregoing i	nformation
(Signature of lobbyist)	22-/8 Date)	~
Paul A. Worsowicz		
(Print Name of Lobbyist)		

State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums

Sworn Statement/Affirmation by Lobbyist Statement of Income and Expenses for:

(Print Name of lobbyist)

Statement of Incor	ne and Expenses for:		
Name of Lobbying	partnership, firm or corpor	ration: GALLAGHER, CA	LLAHAN & GARTRELL, P.C.
Name of Client (lea particular client):		or the partnership, firm, or conodelers Association of NH	orporation and not related to any
Date of Report (che	eck one):		
April 26, 2017 □	July 26, 2017 🛘	October 25, 2017 □	January 24, 2018 🗶
		e Statement of Income and Enternent (insert the number o	expenses described above, and the f Addendum forms being
1 Addendum A	(s).		
0 Addendum B	(s).		
0 Addendum Co	(s).		
	ffirm that the foregoing int t of my knowledge and be		and each Addendum is true and
OBL			i ZZ (B
(Signature of Lobb	oyist)		(Date)
Ari B. Pollack			

State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums

Sworn Statement/Affirmation by Lobbyist Statement of Income and Expenses for:
Name of Lobbying partnership, firm or corporation: GALLAGHER, CALLAHAN & GARTRELL, P.C.
Name of Client (leave blank if Statement is for the partnership, firm, or corporation and not related to any particular client): Home Builders & Remodelers Association of NH
Date of Report (check one):
April 26, 2017 ☐ July 26, 2017 ☐ October 25, 2017 ☐ January 24, 2018 🔀
I have read RSA 15, RSA 15-B, RSA 664, the Statement of Income and Expenses described above, and the following Addendums submitted with that Statement (insert the number of Addendum forms being submitted):
1 Addendum A(s).
0 Addendum B(s).
0 Addendum C(s).
I hereby swear or affirm that the foregoing information on the Statement and each Addendum is true and complete to the best of my knowledge and belief.
(Signature of Lobbyist) (Date)
Heidi L. Kroll (Print Name of lobbyist)

State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums

Sworn Statement/Affirmation by Lobbyist

Statement of Income and Expenses for:			
Name of Lobbying partnership, firm or corporation: GALLAGHER, CALLAHAN & GARTRELL, P.C.			
Name of Client (leave blank if Statement is for the partnership, firm, or corporation and not related to any particular client): Home Builders & Remodelers Association of NH			
Date of Report (che	ck one):		
April 26, 2017 □	July 26, 2017 □	October 25, 2017 🗆	January 24, 2018 🗵
I have read RSA 15, following Addendur submitted):	RSA 15-B, RSA 664, the ns submitted with that Sta	e Statement of Income and Enternent (insert the number of	expenses described above, and the f Addendum forms being
1 Addendum A(s	s).		
0 Addendum B(s	s).		
0 Addendum C(s	s).		
	firm that the foregoing in of my knowledge and be		and each Addendum is true and
(Signature of Lobby	yist)		1/d2/13 (Date)
Robert J. Dietel			
(Print Name of lob	byist)		